# 大600237 JUN 1 3 2000

## **EHC400 Desktop Patient Station**

510 (k) Premarket Notification January 23, 2000

Attachment VII

510 (k) Summary

The following information is in accordance with 21 CFR 807.92

## Submitter's Name, Address, Telephone Number, Contact Person, Preparation Date

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Richard E. Halbach, Ph.D.

(Regulatory Consultant to CyberCare, Inc.)

January 10, 2000

## Name of the Device and Classification Name/Number

EHC400 Desktop Patient Station (EHC400)

21 CFR 870.1130

DXN

Class II

Noninvasive Blood Pressure Measuring Systems

21 CFR 870.2910

**FLL** 

Class II

Thermometer Electronic Clinical

21 CFR 870.2700

DQA

Class II

Noninvasive Pulse Oximeters

## **Description of the Device**

The EHC400 Desktop Patient Station (EHC400) is a new monitor with the same parameters as existing legally marketed devices. The EHC400 is designed to provide monitoring of patients, at home, or other patient care environment. The system includes the following physiologic functions: Noninvasive blood pressure (NIBP), oximeter (SpO<sub>2</sub>), and electronic oral temperature.

The EHC System consists of two units, a transportable EHC400 Patient Station, installed where it can be conveniently accessed by the patient, and the EHC600 Care Provider Station, installed in the office of a professional caregiver. The two terminals, modem connected by standard phone lines or other digital transmission service, provide real-time audio and video communication between the patient and the caregiver. Blood pressure, blood oxygenation saturation and pulse rate, and oral temperature are transmitted over the communication link for display on the Caregiver Terminal. The Patient Station has a touch screen display to facilitate patient interaction with the system. The Care Provider Station can function as a stand-alone database terminal to collect data from the patient for subsequent caregiver analysis.

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## Substantial Equivalence

The EHC400 is substantially equivalent to aspects of the predicate systems, the BCI 9203 Advisor (K982279), the BCI 6004 Mini-Torr (K070801, K083796), and the Welch Allyn Suretemp 6004 (K964643), and has features that are equivalent to features found in the predicate devices, Alaris, LifeSigns Shuttle & Commander (K964408), American Telecare, Personal Telemedicine System (K964554), and HomMed, Monitoring System. The EHC400 and the BCI predicate devices have the same general use of vital signs data collection. The Alaris, American Telecare, and HomMed systems are intended for out-of-hospital use. These systems include cleared elements to acquire SpO<sub>2</sub>, blood pressure, and oral temperature, and provide patient/caregiver communications.

There are minor differences between the EHC400 and the predicate devices. For example, with the EHC400 four vital signs are measured. Simultaneous voice, video, and data communications are possible between the patient site and the caregiver. Several of the predicates include vital signs alarm functions which are not available on the EHC400. These differences are not significant with regard to performance of the vital signs data acquisition functions. Functionality and safety of the EHC400 are substantially equivalent to the predicate devices and components.

#### Intended Use

The EHC400 Desktop Patient Station is a portable patient monitoring system for intermittent use by adult patients or pediatric patients with adult supervision in the home, or in a patient care center. The system consists of a Care Provider Station (EHC600) and a Desktop Patient Station (EHC400) with two-way video, audio and data communication between the two. The EHC400 Desktop Patient Station provides the following physiologic functions:

- Noninvasive blood pressure (NIBP), provides systolic, diastolic, mean arterial pressure (mmHg)
- Oximeter, provides % oxygen saturation
- Heart Rate (BPM, function provided by oximeter)
- Electronic Thermometer, provides oral temperature ° C, °F

The device will provide NIBP for pediatric through adult patients when used with an appropriately sized blood pressure cuff. The oximetry option works with specified oximeter sensors. The thermometry section requires the use of specified oral thermometry probes and covers and provides information for patients, pediatric through adult, in the 4 second and monitor modes.

The device is not intended to be applied to the patient for long periods of time as in conventional beside monitoring applications, but for intermittent use by cooperative adult patients, or pediatric patients with adult supervision and assistance.

The EHC600 Care Provider Station provides audio/video patient contact, and patient data archival functions to the caregiver.

The indications for the EHC400 do not differ significantly from the predicate, or legally marketed devices, with the following exceptions. The device is not intended for use on neonates. It is not intended for continuous patient monitoring. Therefore, the automatic alarm limit functions available on several of the predicate devices are not included. It is not intended to be used in environments where defibrillators are expected to be used.

## Performance Data

This device uses currently available technology found in legally marketed devices. Testing, to ensure that the EHC400 would perform as intended, was conducted at two levels. Bench testing using simulators was used to test each function. Clinical testing using volunteers was used to verify performance of SpO<sub>2</sub>, heart rate, NIBP, and oral temperature.

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The EHC400 system meets applicable standards for performance and EMC compliance.

#### Non-clinical Testing

Commercially available simulators were used to evaluate the three functional modules within the EHC400. The same protocol was used to obtain data from three 510 (k) cleared predicate devices presently being marketed. Each predicate device tested contained a functional module equivalent to that in the EHC400 and from the same manufacturer. Test results include comparison of data between the EHC400 and the predicate device.

The average differences of all the NIBP mmHg readings were 3.87 for SYS, -0.47 for DIA, and -0.63 for MAP. The average differences of all the oximeter readings was 0.52 for % SpO2 and -0.02 BPM for heart rate. The differences for the oral temperature readings were -0.1 °F for the 4 –Second mode and -0.1 °F for the Monitor mode. This shows that the vital signs modules in the EHC400 operate the same as those in the predicate devices listed in the following table.

EHC400 Desktop Patient Station	Predicate Unit Containing	
(EHC400)Function	Same Functional Module	
NIBP	Sims BCl Advisor Model 9203, (K982279)	
SpO <sub>2</sub>	Sims BCI Mini-Torr Model 6004, (K970801, K983796)	
Heart Rate	Sims BCI Mini-Torr Model 6004, (K970801, K983796)	
Thermometer	Diatek/Welch Allyn SureTemp Model 679, (K964643)	

### **Clinical Testing**

Comparative clinical testing was performed on 39 volunteer subjects under an appropriate IRB approved protocol. Differences in readings between the EHC400 and the Predicate devices listed in the above table were analyzed to determine the mean and standard deviation values. All measurements were taken with the individual seated adjacent to the Patient Terminal to simulate the normal operating environment.

The average differences of all the NIBP mmHg readings were 4.56 for SYS, -0.50 for DIA, and -0.49 for MAP. The average differences of all the oximeter readings was 0.18 for % SpO2 and 0.18 BPM for heat rate. The average differences for the oral temperature readings were 0.08 °F for the 4 –Second mode and 0.02 °F for the Monitor mode. This shows that the vital signs modules in the EHC400 operate the same as those in the predicate devices listed in the table above.

#### Conclusion

This summary of 510 (k) safety and effectiveness has been submitted in accordance with the SMDA of 1990 and 21 CFR 807.92. CyberCare concludes, based on the above referenced testing, that the device is substantially equivalent to the predicate devices as described.

## DEPARTMENT OF HEALTH & HUMAN SERVICES



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Cybercare, Inc. C/O Richard Halbach, Ph.D. 7840 Roswell, Suite 320 Atlanta, GA 30350

JUN 1 6 2000

Re: K000237

EHC 400 Desktop Patient Station and EHC 600 Care

Provider Station

Regulatory Class: II (two) Product Code: DXN and DQA Dated: April 18, 2000

Received: April 19, 2000

Dear Dr. Halbach:

This letter corrects our substantially equivalent letter of June 13, 2000, regarding the 510(k) number.

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic QS inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

## Page 2 - Richard Halbach, Ph.D.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4648. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address "http://www.fda.gov/cdrh/dsma/dsmamain.html".

Sincerely yours,

James E. Dillard III

Director

Division of Cardiovascular and Respiratory Devices Office of Device Evaluation Center for Devices and

Radiological Health

Enclosure



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

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Sincerely yours,

James E. Dillard III

Director

Division of Cardiovascular and Respiratory Devices Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

510(k) Number (if known): <u>K00</u>	0237
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Device Name:

EHC400 Desktop patient Station / EHC600 Care Provider Station

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The EHC600 Care Provider Station provides audio/video patient contact, and patient data archival functions to the caregiver.

(PLEASE DO NOT WRITE BE	LOW THIS LINE, CONTI	NUE ON ANOTHER PAGE IF NEEDED
Concurrenge	of CDRH Office of Device	EVALUATION .
fo	(Division Sign-Off) Division of Cardiovasco	uter Respiratory.
V	and Neurological Device	res K000 37
$\checkmark$	510(k) Number	K 000 23 7 Over-The-Counter Use
Prescription Use	OR	Over-The-Counter Use
(Per 21 CFR 801 109)		